



PHILIP L. BROWNING
Director

**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

Board of Supervisors

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ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

June 06, 2012

24 June 6, 2012

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

Dear Supervisors:

**RECOMMENDATION TO AMEND THE GROUP HOME FOSTER CARE SERVICES CONTRACT WITH OLIVE CREST TREATMENT CENTERS, INC. TO INCREASE GROUP HOME SERVICE DELIVERY SITES AND DELEGATED AUTHORITY TO AMEND SERVICE DELIVERY SITE TO EXISTING GROUP HOME FOSTER CARE CONTRACTS.
(ALL DISTRICTS - 3 VOTES)**

SUBJECT

The Department of Children and Family Services (DCFS) and the Probation Department (Probation) seek to amend Group Home Foster Care Services (GH) Contract Number 07-023-056 with Olive Crest Treatment Centers, Inc. to increase the number of service delivery sites included in the contract in order to serve Probation's target populations of sex offenders, youth with serious mental and emotional disorders, and the developmentally disabled (Regional Center) population effective the date of execution through October 31, 2012. Also, DCFS and Probation seek delegated authority to amend service delivery sites, as needed, to existing GH contracts.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Delegate authority to the Director of DCFS, or designee, and the Chief Probation Officer (CPO) of Probation, or designee, to execute Amendment Number Two to Group Home Foster Care Services Contract Number 07-023-056 with Olive Crest Treatment Centers, Inc. (Attachment A) to increase the number of service delivery sites included in the Contract from one service delivery site to five service delivery sites. The estimated annual placement cost for this amendment is \$2,354,592 to be financed by Title IV-E Waiver funding using 36 percent (\$847,653) Federal revenue, 33 percent (\$777,015) State revenue, and 31 percent (\$729,924) net County cost (NCC). This increase is within the total estimated placement cost of Group Home Foster Care Services. Sufficient funding is included in the DCFS Fiscal Year 2011-12 Adopted Budget and in the Fiscal Year 2012-13 Budget

Request. The Amendment will be effective the date of execution by the Director of DCFS, or his designee, and the CPO, or his designee. All other terms and conditions of the Contract will remain unchanged.

2. Delegate authority to the Director of DCFS, or designee, and the CPO, or designee, to prepare and execute future amendments to the existing GH Contracts to increase or decrease the number of service delivery sites, as needed, after County Counsel and Chief Executive Officer (CEO) approval. The Director will notify the Board and the CEO in writing within ten business days after execution.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

The recommended action to amend the Olive Crest Treatment Centers, Inc. GH Contract will allow DCFS and Probation to continue ensuring the safety and well-being of children under their supervision by adding 24 Rate Classification Level (RCL) 12 beds for Probation youth. GHs offer a more structured out-of-home environment to children who need a higher level of care than that provided in a family setting.

Without approval of the recommended actions, DCFS and Probation's ability to provide a safe, protective environment to all children under their supervision may be compromised.

Implementation of Strategic Plan Goals

The amendment is consistent with the principles of the Countywide Strategic Plan's Goal #2, Children, Family and Adult Well-Being, as it enables DCFS and Probation to work collaboratively with GHs to provide a safe, protective, and nurturing environment for children under their supervision.

FISCAL IMPACT/FINANCING

The estimated annual placement cost for this amendment is \$2,354,592 to be financed by Title IV-E Waiver funding using 36 percent (\$847,653) Federal revenue, 33 percent (\$777,015) State revenue, and 31 percent (\$729,924) NCC. This increase is within the total estimated placement cost of GHs. Funding is included in the Department's Fiscal Year 2011-12 Adopted Budget and will be included for subsequent fiscal years in the Department's budget request.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On October 21, 2008, your Board adopted the GH Master Agreement. The initial term of the GH Master Agreement was November 1, 2008, through October 31, 2009, with an option to extend for up to four additional 12 month renewal periods through October 31, 2013, and for six months beyond the current expiration date, if such time is necessary for the completion of a solicitation or negotiation of a new contract. GHs provide out-of-home care to the population of children who require a more structured environment than can be provided in a family home setting. GH placements are utilized for children currently under the supervision of DCFS and Probation.

The California Department of Social Services Community Care Licensing Division establishes the Rate Classification Level (RCL) based on the level of care and services provided by the GH. GHs

are reimbursed based on the Group Home RCL.

The CEO and County Counsel have reviewed this Board letter and the attached amendment. The amendment has been approved as to form by County Counsel.

CONTRACTING PROCESS

The current GH providers' contracts were executed November 1, 2008, and were solicited through a Request for Statement of Qualifications (RFSQ) process that was released on August 31, 2007. The RFSQ contained provisions for open submission periods as needed. Addendum Number Eleven was released on August 23, 2010, to open a submission period for Probation placements. A Prospective Contractor's Conference was held on September 14, 2010. Four prospective contractors submitted a Statement of Qualifications (SOQ) on November 19, 2010, in response to RFSQ CMS # 07-021/023. Of the four prospective contractors, one was disqualified, one withdrew from the process, and the third will have their GH Contract executed with delegated authority. The fourth prospective contractor, Olive Crest Treatment Centers, Inc., is an existing GH provider whose contract amendment is being recommended for approval with this Board letter.

CONTRACTOR PERFORMANCE

The current GH contract for Olive Crest Treatment Centers, Inc. is monitored on an annual basis. Monitoring results for the most recent monitoring period indicate that the services specified in the GH contract were delivered. The results also indicate that Olive Crest Treatment Centers, Inc. experienced some compliance issues unrelated to child safety issues (e.g. incomplete documentation). Olive Crest Treatment Centers, Inc. submitted a Corrective Action Plan that was reviewed and approved by County program managers. To assist Olive Crest Treatment Centers, Inc. with compliance, DCFS conducted a mandatory training on Needs and Services Plans/Quarterly Reports for all contracted GH providers on January 27, 2012.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Without the approval of the recommended action, Probation may not be able to meet its current need for placement of youth who are sex offenders. Approval of the recommended action would help to ensure that beds are available for this population of youth.

CONCLUSION

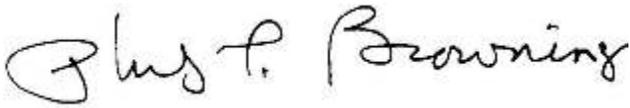
Upon Board approval, the Executive Officer, Board of Supervisors, is requested to return one adopted stamped Board Letter and Amendment to the Department of Children and Family Services and one to the Probation Department.

The Honorable Board of Supervisors

6/6/2012

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Respectfully submitted,



PHILIP L. BROWNING

Director

PLB:CMM

DM:CC:jar



JERRY E. POWERS

Chief Probation Officer

Enclosures

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Chief Probation Officer



AMENDMENT NUMBER TWO

TO

**GROUP HOME FOSTER CARE SERVICES
CONTRACT NUMBER 07-023-056**

WITH

OLIVE CREST TEATMENT CENTERS, INC.

**AMENDMENT NUMBER TWO TO
GROUP HOME FOSTER CARE SERVICES
CONTRACT NUMBER 07-023-056**

WITH

OLIVE CREST TREATMENT CENTERS, INC.

This Amendment Number Two to Group Home Foster Care Services Contract Number 07-023-056 (hereinafter referred to as "Contract"), adopted by the Board of Supervisors on October 21, 2008, is made and entered into by and between the County of Los Angeles, (hereinafter referred to as "COUNTY"), and Olive Crest Treatment Centers, Inc., (hereinafter referred to as "CONTRACTOR"), this ____ day of _____, 2012.

WHEREAS, CONTRACTOR provides group home foster care services to the COUNTY on Contract Number 07-023-056; and

WHEREAS, CONTRACTOR has four (4) licensed group home facilities to serve the Probation Department population on Group Home Program Number 0248.00.05; and

WHEREAS, this Amendment is prepared pursuant to the provisions set forth in Section 5.0, CHANGES AND AMENDMENTS, in the Group Home Contract; and

WHEREAS, on October 21, 2008, the Board of Supervisors approved the Group Home Foster Care Services Contracts with qualified non-profit corporations for the provision of group home foster care services; and

WHEREAS, CONTRACTOR warrants that it possesses the competence, expertise and personnel necessary to provide such services, and for the purposes of this Contract, considers itself a sub-recipient insofar as compliance with the Office of Management and Budget (OMB) Circular A-133.

NOW THEREFORE, COUNTY and CONTRACTOR agree to amend the Group Home Foster Care Services Contract as follows:

1. Exhibits, Exhibit B-II – Program Number 0248.00.05 Program Statement has been added.
2. Exhibits, Exhibit K-II – Group Home Facility Licenses is amended to add State of California, Department of Social Services group home licenses for the following facilities in Perris, CA:
 - a. Beazer – Facility Number 336403863
 - b. Forecast – Facility Number 336403949
 - c. Lyon – Facility Number 336403698
 - d. Richmond - Facility Number 336403699

3. Exhibits, Exhibit BB II – Service Delivery Sites Form has been added.

EXCEPT AS PROVIDED IN THIS AMENDMENT NUMBER TWO, ALL OTHER TERMS AND CONDITIONS OF THE CONTRACT SHALL REMAIN IN FULL FORCE AND EFFECT.

**AMENDMENT NUMBER TWO TO GROUP HOME FOSTER CARE SERVICES
CONTRACT NUMBER 07-023-056**

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment Number Two to be subscribed on its behalf by the Director of the Department of Children and Family Services and the Chief Probation Officer of the Probation Department and the CONTRACTOR has subscribed the same through its authorized officers, as of the day, month and year first above written. The persons signing on behalf of the CONTRACTOR warrant under penalty of perjury that they are authorized to bind the CONTRACTOR.

COUNTY OF LOS ANGELES

CONTRACTOR

By _____
Philip L. Browning
Director
Department of Children and
Family Services

Name of Agency

By _____

Name _____

Title _____

By _____
Jerry E. Powers
Chief Probation Officer
Probation Department

By _____

Name _____

Title _____

APPROVED AS TO FORM:
BY THE OFFICE OF COUNTY COUNSEL
JOHN KRATTLI, Acting County Counsel

Tax Identification Number

By _____
David Beaudet,
Senior Deputy County Counsel

EXHIBIT B-II

CONTRACTOR'S PROGRAM STATEMENT IS FILED UNDER SEPARATE COVER

GROUP HOME FACILITY LICENSE(S)



State of California
Department of Social Services

Facility Number: 197804913
Effective Date: 09/23/05 Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to

OLIVE CREST TREATMENT CENTERS, INC.

to operate and maintain a GROUP HOME

Name of Facility

OLIVE CREST TREATMENT CENTERS
15235 CORNUTA
BELLFLOWER CA 90706

This License is not transferable and is granted solely upon the following:

LICENSEE PREFERS TO SERVE EMOTIONALLY DISTURBED MALES, AGES 11-17 YEARS OLD. AMBULATORY ONLY.

Client Groups Served: WARD/DEPENDENTS

Complaints regarding services provided in this facility should be directed to:

LA & TRI-COASTAL CR DISTRICT OFFICE (323) 981-3300

Jo Frederick

Deputy Director,
Community Care Licensing Division


Authorized Representative
of Licensing Agency

09/25/06



State of California
Department of Social Services

Facility Number: 336403863
Effective Date: 11/27/00 Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to
OLIVE CREST TREATMENT CENTERS, INC.

to operate and maintain a GROUP HOME

Name of Facility

BEAZER
20051B VISTA DEL LAGO
PERRIS CA 92570

This License is not transferable and is granted solely upon the following:

LICENSEE SERVES AMBULATORY YOUTH, AGES 11-17

Client Groups Served: CHILDREN

Complaints regarding services provided in this facility should be directed to:

PACIFIC INLAND CR DISTRICT OFFICE (909) 782-4207

David Dodds

Deputy Director,
Community Care Licensing Division


Authorized Representative
of Licensing Agency



State of California
Department of Social Services

Facility Number: 336403949
Effective Date: 07/26/01 Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to
OLIVE CREST TREATMENT CENTERS, INC.

to operate and maintain a GROUP HOME

Name of Facility

FORECAST
20051A VISTA DEL LAGO
PERRIS CA 92570

This License is not transferable and is granted solely upon the following:

LICENSEE SERVES AMBULATORY YOUTH, AGES 11-17

Client Groups Served: CHILDREN

Complaints regarding services provided in this facility should be directed to:

PACIFIC INLAND CR DISTRICT OFFICE (909) 782-4207

David Dodds

Deputy Director,
Community Care Licensing Division


Authorized Representative
of Licensing Agency



State of California
Department of Social Services

Facility Number: 336403698
Effective Date: 06/28/00 Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to
OLIVECREST TREATMENT CENTERS, INC.

to operate and maintain a GROUP HOME

Name of Facility

LYON
20025B VISTA DEL LAGO
PERRIS CA 92570

This License is not transferable and is granted solely upon the following:

LICENSEE SERVES AMBULATORY YOUTH, AGES 11-17

Client Groups Served: CHILDREN

Complaints regarding services provided in this facility should be directed to:

PACIFIC INLAND CR DISTRICT OFFICE (909) 782-4207

David Dodds

Deputy Director,
Community Care Licensing Division


Authorized Representative
of Licensing Agency



State of California
Department of Social Services

Facility Number: 336403699
Effective Date: 06/28/00 Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to
OLIVECREST TREATMENT CENTERS, INC.

to operate and maintain a GROUP HOME

Name of Facility

RICHMOND
20025A VISTA DEL LAGO
PERRIS CA 92570

This License is not transferable and is granted solely upon the following:
LICENSEE SERVES AMBULATORY YOUTH, AGES 11-17

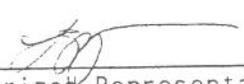
Client Groups Served: CHILDREN

Complaints regarding services provided in this facility should be directed to:

PACIFIC INLAND CR DISTRICT OFFICE (909) 782-4207

David Dodds

Deputy Director,
Community Care Licensing Division



Authorized Representative
of Licensing Agency

SERVICE DELIVERY SITES

SERVICE DELIVERY SITES
Administrative Office/Headquarters

EXHIBIT BB II

Type of program: Foster Family Agency
 (Check one): Group Home

| AGENCY NAME | AGENCY ADDRESS CITY, STATE, ZIP CODE | AGENCY CONTACT PERSON | TELEPHONE AND FAX NUMBERS |
|-------------|---|--------------------------|----------------------------------|
| OLIVE CREST | 2130 E. FOURTH ST, STE 200 SANTA ANA, CA 92705 | DONALD VERLEUR | 714-543-5437 714-543-5463 |

Licensed Facilities Included in this Contract

| FACILITY NAME | YOUTH SERVED- DCFS OR PROB | FACILITY ADDRESS CITY, STATE, ZIP CODE | FACILITY CONTACT PERSON | TELEPHONE AND FAX NUMBERS |
|----------------|-------------------------------|--|----------------------------|------------------------------|
| BEAZER HOUSE | DCFS/PROB | 20051 'B' Vista del Lago Perris, CA 92570 | David Harper | 951-686-8500 951-369-3037 |
| LYON HOUSE | DCFS/PROB | 20025 'B' Vista del Lago Perris, CA 92570 | David Harper | 951-686-8500 951-369-3037 |
| FORECAST HOUSE | DCFS/PROB | 20051 'A' Vista del Lago Perris, CA 92570 | David Harper | 951-686-8500 951-369-3037 |
| RICHMOND HOUSE | DCFS/PROB | 20025 'A' Vista del Lago Perris, CA 92570 | David Harper | 951-686-8500 951-369-3037 |

SERVICE DELIVERY SITES

Yes No Are any of the facilities listed above on County owned or County Leased property? If yes, please provide an explanation:

Yes No Do any or your agency's Board members or employees, or members of their immediate families own any property leased or rented by your agency? If yes, please provide an explanation.

On behalf of Olive Crest (Contractor's name), I Donald A. Verleur
(Name of Contractor's authorized representative), certify that the information contained in this Service Delivery Sites – Form #23
is true and correct to the best of my information and belief.

Donald A. Verleur, CEO

Print Name and Title of Principal Owner, an Officer, or Manager responsible for submission of the SOQ to the County.

Signature of Principal Owner, an Officer, or Manager responsible for submission of the SOQ to the County.

11-9-10

Date